



**PATENT**  
Attorney Docket No. ZAQ-001  
(104816/159713)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS: Kersley et al.

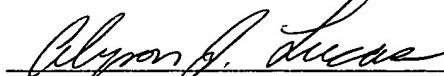
SERIAL NUMBER: 10/016,172 ART UNIT: 2144

FILING DATE: December 6, 2001 EXAMINER: Pearson, Yvette B.

TITLE: System and Method for Verifying a Device

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 10<sup>th</sup> day of November, 2005.

  
Alyson J. Lucas

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Change of Correspondence Address (1 pg.);
3. Power of Attorney /Revocation of Prior Powers and New Power of Attorney (1 pg.); and
4. Return Receipt Postcard.



# TRANSMITTAL FORM

Application Serial Number	10/016,172
Filing Date	December 6, 2001
First Named Inventor	Kersley
Group Art Unit	2144
Examiner Name	Pearson, Yvette B.
Attorney Docket No.	ZAQ-001
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

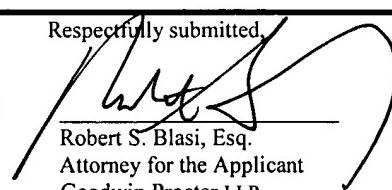
<input type="checkbox"/> Fee Transmittal Form (1 pg.) <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input checked="" type="checkbox"/> Power of Attorney (Revocation of Prior Powers) (1 pg.) <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 (1 pg.) <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Change of Correspondence Address (1 pg.)
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
 Goodwin Procter LLP  
 Exchange Place  
 Boston, MA 02109  
 Tel. No.: (617) 570-1000  
 Fax No.: (617) 523-1231  
 Customer No. 051414

## SIGNATURE BLOCK

Date: November 9, 2005  
 Reg. No. 50,389  
 Tel. No.: (617) 570-1408  
 Fax No.: (617) 523-1231

Respectfully submitted,  
  
 Robert S. Blasi, Esq.  
 Attorney for the Applicant  
 Goodwin Procter LLP  
 Exchange Place  
 Boston, MA 02109